

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>HW</i>	<i>68904</i>	<i>4/21/00</i>
O.I.P.E. CLASSIFIER		<i>10</i>	<i>4-27-00</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>HA</i>	<i>61001</i> <i>858</i>	<i>6/20/00</i> <i>7/10/01</i>

INDEX OF CLAIMS

**BEST AVAILABLE COPY**

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 +/- ..... Restricted      O ..... Objected

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If more than 150 claims or 10 actions  
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